

PART B - ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS



DAVID L. BERSTEIN
C/O GENETICS INSTITUTE, INC.
37 CAMBRIDGE PARK DRIVE
CAMBRIDGE, MA 02140-2387

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME
John J. Toole, Jr.

Street Address
227 High Street

City, State and ZIP Code
Palo Alto, California 94301

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

Check if additional changes are on reverse side

| SERIES CODE/SERIAL NO. | FILING DATE | TOTAL CLAIMS | EXAMINER AND GROUP ART UNIT | DATE MAILED |
|------------------------|-----------------------------|--------------|-----------------------------|----------------|
| 07-0100-005 | 04/11/86 | 012 | TESKIN, R | 1.835 04/18/89 |
| First Named Applicant | TOOLE | JOHN J. | | |
| TITLE OF INVENTION | NOVEL PROCOAGULANT PROTEINS | | | |

| ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPLN. TYPE | SMALL ENTITY | FEES DUE | DATE DUE |
|-------------------|----------------|-----------|-------------|--------------|----------|----------|
| 5031-A-PCT | 435-062,000 | 504 | UTILITY | NO | 620 - 00 | 07/16/89 |

3. Further correspondence to be mailed to the following:

David L. Bernstein
Genetics Institute, Inc.
87 Cambridge Park Drive
Cambridge, MA 02140

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 David L. Bernstein
2 Bruce M. Eisen
3 Ellen J. Kapinos

DO NOT USE THIS SPACE

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S 20428 07/25/89 010085 07-1060 020 142 620.00CH
S 20429 07/25/89 010085 07-1060 020 501 30.00CH

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

Genetics Institute, Inc.

(2) ADDRESS: (City & State or Country)

Cambridge, MA

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

Delaware

A. This application is NOT assigned.

Assignment previously submitted to the Patent and Trademark Office.

Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:

Issue Fee Advanced Order - # of Copies _____

6b. The following fees should be charged to: (Minimum of 10)

DEPOSIT ACCOUNT NUMBER 07-1060
(Enclose Part C)

Issue Fee Advanced Order - # of Copies 20

Any Deficiencies in Enclosed Fees (Minimum of 10)

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

David L. Bernstein

David L. Bernstein, Reg. No. 31,235

(Date) 17 July 1989

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE